with equilibration of right atrial and intrapericardial pressures. These haemodynamic findings have been described before.[1 9 10]

It has been reported that low pressure tamponade, despite occurring in hypovolumic states, does not respond to volume repletion.[2 9] This was seen in this patient, presumably because of the development of a steep intrapericardial pressure-volume curve, curtailing cardiac filling volume.[9]

Pericardial effusions are common after cardiac surgery but they rarely cause clinical cardiac tamponade.[11] Haemodynamically significant postoperative pericardial effusions, however, can be loculated, small in volume, and often fail to present the usual signs of tamponade on cross sectional echocardiography.[3]

Pulsed wave Doppler echocardiography with respirometry can greatly facilitate the non-invasive diagnosis of cardiac tamponade. As shown by this case, Doppler echocardiography may be particularly useful for the diagnosis of low pressure cardiac tamponade when the clinical examination and even cross sectional echocardiography may be misleading.

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NOTICES

British Cardiac Society

The Annual General Meeting will take place at the English Riviera Centre, Torquay on 22 to 25 May 1990. The closing date for receipt of abstracts was 19 January 1990.

Cardiac Doppler

The Fifth International Congress of the International Cardiac Doppler Society will take place in Trondheim on 13 to 15 September 1990. Inquiries to Congress Secretariat, The Norwegian Institute of Technology, Department of Continuing Education, N-7034 Trondheim, Norway.

Cardiology and cardiac surgery

A workshop on Update in Cardiology and Cardiac Surgery: East–West Meet will be held at the Institute of Cardio-Vascular Diseases, Madras on 11 to 13 January 1991. Further information from Dr K M Cherian, Institute of Cardio-Vascular Diseases, 180 NSK Salai, Madras – 26, India.